



JTW

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/828,425
Applicant : Gary C. Steingraber et al
Filed : April 20, 2004

Title : Milking Claw Top

TC/A.U. : 3643
Examiner :

Docket No. : 1484-00384

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the 3rd day of August, 2004.

Jo Ann Kuczynski 8-3-04
Jo Ann Kuczynski Date

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
Mail Stop: IDS
P.O. Box 1450
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Sir:

Applicant notes the references listed on the attached "Information Disclosure Statement By Applicant" PTO Form 1449.

Respectfully submitted,

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT
(use as many sheets as necessary)

Sheet	1	of	
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U.S. PATENT DOCUMENTS

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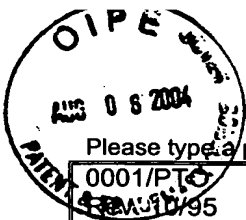
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Patent and Trademark Office: U.S. Department of Commerce

0001/PTO 4/20/04	U.S. Department of Commerce Patent and Trademark Office	Application Number	10/828,425
		Filing Date	April 20, 2004
		First Named Inventor	Gary C. Steingraber
		Group Art Unit	3643
		Examiner Name	
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Attorney Docket Number	1484-00384
Total Number of pages in this Submission		3	

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication To Technology Group
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> After final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board Of Appeals and Interferences
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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> RETURN RECEIPT POSTCARD
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Michael E. Taken (Reg. No. 28,120) ANDRUS, SCEALES, STARKE & SAWALL, LLP 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202
Signature	<i>Michael E. Taken</i>
Date	8/3/04

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Typed or printed name	Jo Ann Kuczynski		
Signature	<i>Jo Ann Kuczynski</i>	Date	8-3-04